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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: | Identify Yourself | | |
|-----|---|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar licer Bring iden | e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee. | Betty First name G Middle name Hood-Escalante Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | Betty G Hood | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number | xxx-xx-5036 | |

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Case number (if known)

Debtor 1 Betty G Hood-Escalante

| | | About Debtor 1: | Abo | out Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|------|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | | have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Bus | siness name(s) |
| | | EINs | EIN | s |
| 5. | Where you live | 40050 0 11 | If D | ebtor 2 lives at a different address: |
| | | 10853 S Hermosa Ave Chicago, IL 60643 | | |
| | | Number, Street, City, State & ZIP Code | Nur | nber, Street, City, State & ZIP Code |
| | | Cook | | |
| | | County | Cot | unty |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | in h | ebtor 2's mailing address is different from yours, fill it nere. Note that the court will send any notices to this ling address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Nur | nber, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Che | eck one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | | |

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Document Case number (if known) Debtor 1 Betty G Hood-Escalante

| Par | t 2: Tell the Court About | our Ban | kruptcy Ca | ise | | | | | |
|-----|---|---|--------------------------------|---|--------------------------|--|--|--------------------------|---|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ☐ Chapter 7 | | | | | | | |
| | | ☐ Cha | pter 11 | | | | | | |
| | | ☐ Cha | pter 12 | | | | | | |
| | | ■ Cha | pter 13 | | | | | | |
| 8. | How you will pay the fee | al o | bout how yo | e entire fee when I file my pour may pay. Typically, if you attorney is submitting your paddress. | are paying | the fee yourself, | you may pay with cash | ı, cashie | er's check, or money |
| | | | | the fee in installments. If | | e this option, sigr | and attach the Applica | ation for | Individuals to Pay |
| | | | • | ee in Installments (Official For at my fee be waived (You m | , | this ontion only i | if you are filing for Char | nter 7 R | v law a judge may |
| | | b a _l | ut is not req pplies to you | uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Fili | may do so able to pay | o only if your inco y the fee in instal | ome is less than 150% of Iments). If you choose t | of the off this optic | ficial poverty line that on, you must fill out |
| 9. | Have you filed for bankruptcy within the last 8 years? | □ No. ■ Yes. | | | | | | | |
| | | | District | Northern District of Illinois Eastern Division | When | 9/17/10 | Case number | 10-41 | 715 |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| 10. | Are any bankruptcy cases pending or being | □No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ Yes. | | | | | | | |
| | | | Debtor | David Escalante | | | Relationship to y | ou/ | Husband |
| | | | District | Northern District of Illinois Eastern Division | When | 4/29/16 | Case number, if | known | 16-14610 |
| | | | Debtor | DIVISION | | | Relationship to y | | |
| | | | District | | When | | Case number, if | | |
| 11. | Do you rent your | ■ No. | Go to I | ine 12. | | | | | |
| | residence? | ☐ Yes. | Has yo | our landlord obtained an evic | tion judgm | ent against you a | and do you want to stay | in your | residence? |
| | | | | No. Go to line 12. | . • | - • | • | - | |
| | | | | Yes. Fill out <i>Initial Statemen</i> bankruptcy petition. | nt About ar | n Eviction Judgm | ent Against You (Form | 101A) a | nd file it with this |

| | | Document | Page 4 of 51 | |
|----------|------------------------|----------|--------------|-----------------------|
| Debtor 1 | Betty G Hood-Escalante | | | ase number (if known) |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | | | |
|---|---|---------------|--|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | and location of busine | ess | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, State | & ZIP Code | | | |
| | it to this petition. | | Check | | to describe your business: | | | |
| | | | | Health Care Busines | ss (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real E | state (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as defi | ned in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broker (| as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | | |
| Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must att | | | urt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of leral income tax return or if any of these documents do not exist, follow the procedure | | | | | |
| | For a definition of small | No. | I am r | ot filing under Chapte | r 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | ling under Chapter 11 | and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Pari | 4: Report if You Own or | Have Any | Hazardo | us Property or Any F | Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. ☐ Yes. | What is | he hazard? | | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | iate attention is why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | lumber, Street, City, State & Zip Code | | | |
| | | | | '' | iss., sussi, suy, suite a Ep sout | | | |

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Debtor 1 Betty G Hood-Escalante

Case number (if known)

45 Tall the court wit

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 51 Case number (if known) Debtor 1 **Betty G Hood-Escalante** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Betty G Hood-Escalante

Betty G Hood-Escalante Signature of Debtor 1

> December 1, 2016 MM / DD / YYYY

Executed on

Signature of Debtor 2

MM / DD / YYYY

Executed on

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Debtor 1 Betty G Hood-Escalante

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Mehul D. Desai | Date | December 1, 2016 |
|--|---------------|---------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Mehul D. Desai | | |
| Printed name | | |
| Swanson & Desai, LLC | | |
| Firm name | | |
| 2314 W North Ave Unit C-1W | | |
| Chicago, IL 60647 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 312-666-7882 | Email address | kswanson@swansondesai.com |
| 6296214 | | |
| Bar number & State | | |

| | | Docume | ent Page 8 of 51 | |
|---------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Betty G Hood-Esc | calante | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | ., | |
|----|--|--------------|-------------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 14,322.11 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 14,322.11 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 26,840.70 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 1,980.00 |
| | Your total liabilities | \$ | 28,820.70 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 6,930.37 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 6,280.00 |
| Pa | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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Case number (if known) Debtor 1 Betty G Hood-Escalante

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

11,458.86 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 16-37996 Doc 1 Filed 12/01/16 Entered 12/01/16 11:20:43 Desc Main Page 10 of 51 Document Fill in this information to identify your case and this filing: Debtor 1 **Betty G Hood-Escalante** Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Avenger Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Debtor 2 only Current value of the Current value of the 65000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$9,275.00 \$9,275.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$9,275.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Case 16-37996 Doc 1 Filed 12/01/16 Entered 12/01/16 11:2 Document Page 11 of 51 Betty G Hood-Escalante Case number | |
|-------------|--|--|
| _ | Describe | |
| 100. | 6 rooms of furniture | \$675.00 |
| □ No | nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners including cell phones, cameras, media players, games Describe 20in TV, 50in TV, 32in TV, 28in TV, 2 ipads, and kitchen appliances | s; music collections; electronic devices \$1,750.00 |
| Examp ■ No | bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; state other collections, memorabilia, collectibles Describe | amp, coin, or baseball card collections; |
| Examp No | eent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis musical instruments Describe | ; canoes and kayaks; carpentry tools; |
| ■ No | ms ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe | |
| ☐ No | bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe | |
| | Used Clothing and Shoes | \$650.00 |
| ☐ No | bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches Describe | |
| | Costume Jewelry and Wedding Band | \$250.00 |
| Exam | prescribe | |
| | 2 Dogs | \$100.00 |
| ☐ No | ther personal and household items you did not already list, including any health aids you did n | not list |
| | Dentures | \$1,000.00 |

Official Form 106A/B Schedule A/B: Property

page 2

Document Page 12 of 51 Case number (if known) Debtor 1 **Betty G Hood-Escalante** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,425.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Cash \$1.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... 17.1. Checking Bank of America \$20.00 Checking **Chase Bank** \$1.11 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

□ No

Institution name or individual: Yes.

> \$600.00 Rental deposit Landlord

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32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

 \square Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

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|------------|--|----------------------------|-----------------------|-----------------------------|-------------------------|
| Deb | or 1 Betty G Hood-Escalante | Document | Page 14 of | Case number (if known) | |
| _ | Other contingent and unliquidated claims of e | every nature, including | g counterclaims | of the debtor and rights to | set off claims |
| | Yes. Describe each claim | | | | |
| 35. | ny financial assets you did not already list | | | | |
| | No | | | | |
| | Yes. Give specific information | | | | |
| 36. | Add the dollar value of all of your entries fro for Part 4. Write that number here | • | | | \$622.11 |
| Part | 5: Describe Any Business-Related Property You C | Own or Have an Interest I | n. List any real esta | ate in Part 1. | |
| 37. D | o you own or have any legal or equitable interest in | n any business-related pr | operty? | | |
| _ | No. Go to Part 6. | | | | |
| | Yes. Go to line 38. | | | | |
| | | | | | |
| Part | Describe Any Farm- and Commercial Fishing-R If you own or have an interest in farmland, list it in | | n or Have an Interes | st In. | |
| | • | | | | |
| | o you own or have any legal or equitable int No. Go to Part 7. | erest in any farm- or c | commercial fishin | ig-related property? | |
| | Yes. Go to line 47. | | | | |
| | in res. Go to line 47. | | | | |
| Part | 7: Describe All Property You Own or Have ar | ı Interest in That You Did | Not List Above | | |
| | to you have other property of any kind you d Examples: Season tickets, country club member | | | | |
| | No | Stilp | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| 54. | Add the dollar value of all of your entries fro | m Part 7. Write that n | umber here | | \$0.00 |
| Part | List the Totals of Each Part of this Form | | | | |
| | | | | | |
| 55. 56. | Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 | | \$9,275.00 | | \$0.00 |
| 57. | Part 3: Total personal and household items, | | \$4,425.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$622.11 | | |
| 59. | Part 5: Total business-related property, line | 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related prope | rty, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 5 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through | 61 | \$14,322.11 | Copy personal property to | otal \$14,322.11 |
| 63. | Total of all property on Schedule A/B. Add lin | ne 55 + line 62 | | | \$14,322.11 |

Official Form 106A/B Schedule A/B: Property page 5

| | | Doddine | T GGC TO OT GT | |
|---|--------------------------|-------------------|----------------|------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Betty G Hood-Es | calante | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if |
| | | | | amende |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are | vou claiming? | Check one only | even if your spo | ouse is filing with you. |
|----|-----------------------------|---------------|----------------|------------------|--------------------------|
| | | | | | |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 6 rooms of furniture Line from Schedule A/B: 6.1 | \$675.00 | | \$675.00 | 735 ILCS 5/12-1001(b) |
| Line Holli Schedule AV.B. V.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 20in TV, 50in TV, 32in TV, 28in TV, 2 ipads, and kitchen appliances | \$1,750.00 | | \$1,750.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used Clothing and Shoes Line from Schedule A/B: 11.1 | \$650.00 | | \$650.00 | 735 ILCS 5/12-1001(a) |
| Ellie Holli Schedule A/B. TT.T | | | 100% of fair market value, up to any applicable statutory limit | |
| Costume Jewelry and Wedding Band Line from Schedule A/B: 12.1 | \$250.00 | | \$250.00 | 735 ILCS 5/12-1001(b) |
| Line IIIII Schedule A/B. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2 Dogs Line from Schedule A/B: 13.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| LINE HOTH SCHEdule AVB. 13.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 1 Betty G Hood-Escalante Case number (if known)

| | | | | , | |
|----|---|--------------------------------------|---------|---|-----------------------|
| | rief description of the property and line on chedule A/B that lists this property | Current value of the portion you own | Amo | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| _ | ash ne from <i>Schedule A/B</i> : 16.1 | \$1.00 | | \$1.00 | 735 ILCS 5/12-1001(b) |
| LI | THE HOLL SCHEDULE AVE. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | hecking: Bank of America | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| LI | ne nom <i>Schedule Arb.</i> 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | hecking: Chase Bank | \$1.11 | | \$1.11 | 735 ILCS 5/12-1001(b) |
| LI | THE HOTH Scriedule A/B. 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ental deposit: Landlord | \$600.00 | | \$600.00 | 735 ILCS 5/12-1001(b) |
| LI | THE HOTH Schedule PAB. 22.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No | | | led on or after the date of adjustme | nt.) |
| _ | Yes. Did you acquire the property cover | red by the exemption wi | ithin 1 | .215 davs before you filed this case | ? |
| _ | □ No | , | | . , , | |
| | ☐ Yes | | | | |

| | | | Document | Page 17 | ⁷ of 51 | | |
|---------|----------------------------------|--------------------------|--|---------------------|---|--------------------------|---------------------|
| Filli | in this inform | ation to identify you | ur case: | | | | |
| Deb | tor 1 | Betty G Hood-E | scalante | | | | |
| 200 | | First Name | Middle Name | Last Name | | - | |
| Deb | tor 2 | | | | | | |
| (Spot | use if, filing) | First Name | Middle Name | Last Name | | | |
| Unit | ed States Banl | kruptcy Court for the | : NORTHERN DISTRICT OF I | LLINOIS | | | |
| | | . , | | | | - | |
| | e number | | | | | | |
| (if kno | own) | | | | | | if this is an |
| | | | | | | amend | ded filing |
| ∩ffi | icial Form | 106D | | | | | |
| | | | M# 11 01 : | • | | | |
| SC | <u>neaule l</u> | D: Creditors | S Who Have Claims | Secure | by Propert | <u>y</u> | 12/15 |
| Be as | complete and | accurate as possible. | If two married people are filing toge | ther, both are eq | ually responsible for su | upplying correct informa | tion. If more space |
| | | Additional Page, fill it | out, number the entries, and attach | it to this form. O | n the top of any additio | nal pages, write your na | me and case |
| | er (if known). | | | | | | |
| | | nave claims secured b | | | | | |
| | ☐ No. Check t | this box and submit t | this form to the court with your other | er schedules. Yo | ou have nothing else t | o report on this form. | |
| | Yes. Fill in a | all of the information | below. | | | | |
| Part | 1: List All | Secured Claims | | | | | |
| 2. Li | st all secured c | laims. If a creditor has | more than one secured claim, list the c | reditor separately | Column A | Column B | Column C |
| for e | ach claim. If mo | re than one creditor has | s a particular claim, list the other creditor | ors in Part 2. As | Amount of claim | Value of collateral | Unsecured |
| much | h as possible, lis | t the claims in alphabet | ical order according to the creditor's na | me. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.4 | First Inves | tors Financial | | | | | |
| 2.1 | Services | | Describe the property that secures | s the claim: | \$23,575.00 | \$9,275.00 | \$14,300.00 |
| | Creditor's Name | | 2012 Dodge Avenger 65000 | 0 miles | | | |
| | | | | | | | |
| | | lway Dr Ste | As of the date you file, the claim is | 3: Check all that | | | |
| | 400 Houston, T | V 77057 | apply. | | | | |
| | | | Contingent | | | | |
| | Number, Street, C | City, State & Zip Code | Unliquidated | | | | |
| Who | owes the deb | ot? Check one | ☐ Disputed Nature of lien. Check all that apply | , | | | |
| _ | | orion one. | ☐ An agreement you made (such a | | rured | | |
| | Debtor 1 only Debtor 2 only | | car loan) | s mortgage or sec | Sureu | | |
| | Debtor 1 and Deb | otor 2 only | ☐ Statutory lien (such as tax lien, m | ochanic's lian) | | | |
| _ | | e debtors and another | ☐ Judgment lien from a lawsuit | echanic's lien) | | | |
| _ | check if this clai | | Other (including a right to offset) | Purchase I | Money Security | | |
| | community deb | | Other (including a right to onset) | | | | |
| | | Onemad | | | | | |
| | | Opened 01/13 Last | | | | | |
| Date | debt was incur | | Last 4 digits of account nu | mber 0001 | | | |
| | | 1101110 00,10 | | | | | |
| | Signature | Smiles Dental | | | | | |
| 2.2 | Care | onnics Dentai | Describe the property that secures | s the claim: | \$3,265.70 | \$1,000.00 | \$2,265.70 |
| | Creditor's Name | | Dentures | | | | |
| | | | | | | | |
| | | | As of the date you file, the claim is | S: Chack all that | | | |
| | 1128 Lake | | apply. | 2 Officer all triat | | | |
| | | IL 60301-1058 | Contingent | | | | |
| | Number, Street, 0 | City, State & Zip Code | ☐ Unliquidated | | | | |
| Wha | owes the deb | at? Chack and | ☐ Disputed Nature of lien. Check all that apply | | | | |
| _ | | A: CHECK ONE. | _ | | numa d | | |
| _ | Debtor 1 only | | ☐ An agreement you made (such a car loan) | s mongage or sec | Sured | | |
| | ebtor 2 only Sebtor 1 and Deb | | ☐ Statutory lien (such as tay lien, m | | | | |
| 1.15 | JEDIOL J SUG I JOH | nor z oniv | I I STATUTORY HAD retich as tay han m | (echanic's lien) | | | |

☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

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| Debtor 1 Betty G Hood-Escalante | | | Case number (if know) | | | |
|--|---|-----------------------------------|---|-------------------------|--|-------------------------|
| | First Name | Middle Name | Last Name | _ | | |
| ☐ Check if this claim relates to a community debt | | a I | Other (including a right to offset) | Mechanic's Lie | n | |
| Date de | bt was incurred | | Last 4 digits of account num | ber <u>0401</u> | | |
| | | | | | | |
| Add th | ne dollar value of your er | ntries in Colum | n A on this page. Write that num | ber here: | \$26,840.70 | |
| If this is the last page of your form, add the dollar value totals from all pages Write that number here: | | | | \$26,840.70 | | |
| Part 2: | List Others to Be N | otified for a D | Pebt That You Already Listed | | | |
| trying to | collect from you for a d | lebt you owe to debts that you | someone else, list the creditor listed in Part 1, list the additiona | in Part 1, and then lis | dy listed in Part 1. For example, if st the collection agency here. Simi ou do not have additional persons | larly, if you have more |
| | Name, Number, Street, City First Investors Fina | ,, | | On which line | in Part 1 did you enter the creditor? | 2.1 |
| 3 | Attn: Bankruptcy 880 Interstate N Pwy Atlanya, GA 30339 | y Ste 300 | | Last 4 digits of | of account number | |

| | 0430 10 01000 1 | Document | Page 1 | 9 of 51 | .40 Best Main |
|--|---|--|---|---|--|
| Fill in this i | nformation to identify your o | | | | |
| Debtor 1 | Betty G Hood-Esc | alante | | | |
| 20010 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | |
| Case numb | er | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Schedu | | ho Have Unsecured e Part 1 for creditors with PRIORIT | | Part 2 for creditors with NON | 12/15 NPRIORITY claims. List the other party to |
| any executory Schedule G: I Schedule D: 0 eft. Attach the name and cas | y contracts or unexpired leases of Executory Contracts and Unexpi Creditors Who Have Claims Secu e Continuation Page to this page se number (if known). | that could result in a claim. Also li ired Leases (Official Form 106G). D ured by Property. If more space is r e. If you have no information to rep | st executory on the second of | ontracts on Schedule A/B: F any creditors with partially s he Part you need, fill it out, | Property (Official Form 106A/B) and on |
| | ist All of Your PRIORITY Un | | | | |
| | creditors have priority unsecured | d claims against you? | | | |
| | Go to Part 2. | | | | |
| ☐ Yes. | | | | | |
| | ist All of Your NONPRIORIT | | | | |
| 3. Do any o | reditors have nonpriority unsec | ured claims against you? | | | |
| ☐ No. Y | ou have nothing to report in this pa | art. Submit this form to the court with | your other sche | edules. | |
| Yes. | | | | | |
| unsecure | ed claim, list the creditor separately | | identify what t | ype of claim it is. Do not list cla | tor has more than one nonpriority aims already included in Part 1. If more laims fill out the Continuation Page of |
| | | | | | Total claim |
| 4.1 CC | I/Contract Callers Inc | Last 4 digits of acco | ount number | 2002 | \$401.00 |
| Non | priority Creditor's Name | | | Opened 02/15 Leet | Activo |
| | ntract Callers Inc. Cci gusta, GA 30901 | When was the debt | incurred? | Opened 03/15 Last / 11/13 | —————————————————————————————————————— |
| | nber Street City State Zlp Code | As of the date you f | ile, the claim i | s: Check all that apply | |
| _ | o incurred the debt? Check one. | | | | |
| = [| Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and ano | | ITY unsecured | d claim: | |
| | Check if this claim is for a comm | | | | |
| deb Is th | t ne claim subject to offset? | ☐ Obligations arising report as priority claing | g out of a sepa ns | ration agreement or divorce th | nat you did not |
| o | • | | | g plans, and other similar deb | ts |
| _ · | | Other. Specify | • | 01 , | |
| | 100 | Other. Specify | Jonnionw | Juilli Lu | |

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Page 20 of 51 Document Debtor 1 Betty G Hood-Escalante Case number (if know) 4.2 **ERC/Enhanced Recovery Corp** Last 4 digits of account number 2862 \$147.00 Nonpriority Creditor's Name Opened 06/14 Last Active 8014 Bayberry Rd When was the debt incurred? 06/12 Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney At T ☐ Yes 4.3 Franciscan ExpressCare Last 4 digits of account number \$50.00 Nonpriority Creditor's Name When was the debt incurred? 211 Dixie Hwy Chicago Heights, IL 60411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.4 IC Systems, Inc \$232.00 Last 4 digits of account number 3511 Nonpriority Creditor's Name When was the debt incurred? Po Box 64378 Saint Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No ☐ Yes report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify 01 Banfield Pet Hospital

Is the claim subject to offset?

Document Page 21 of 51 Debtor 1 Betty G Hood-Escalante Case number (if know) 4.5 IC Systems, Inc Last 4 digits of account number 1001 \$117.00 Nonpriority Creditor's Name Opened 12/14 Last Active Po Box 64378 When was the debt incurred? 01/13 Saint Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Att Midwest ☐ Yes 4.6 Ingalls Memorial Hospital Last 4 digits of account number \$152.00 Nonpriority Creditor's Name When was the debt incurred? One Ingalls Drive Harvey, IL 60426 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections 4.7 Michele Halliburton Last 4 digits of account number \$400.00 Nonpriority Creditor's Name When was the debt incurred? 17225 Oakwood Ct Country Club Hills, IL 60478 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

■ Other. Specify Notice Only

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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| 4.8 | Midland Fu | nding | Last 4 digits of account number | r 4127 | , | \$481.00 |
|-------------------------------|---|--|---|--------------------------|--|---------------------------|
| | Nonpriority Cre | ditor's Name | _ | Onc | ned 11/15 Last Active | |
| | 2365 Northside Dr Ste 30 San Diego, CA 92108 Number Street City State Zlp Code Who incurred the debt? Check one. | | When was the debt incurred? | - | | |
| - | | | As of the date you file, the claim is: Check all that apply | | | |
| | ■ Debtor 1 on | ıly | ☐ Contingent | | | |
| | Debtor 2 on | ıly | ☐ Unliquidated | | | |
| | _ | d Debtor 2 only | ☐ Disputed | | | |
| | | e of the debtors and another | Type of NONPRIORITY unsecur | ed claim: | | |
| | | is claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | | ☐ Obligations arising out of a sepreport as priority claims | paration a | greement or divorce that you did not | |
| | ■ No | | Debts to pension or profit-shar | ring plans, | and other similar debts | |
| | ☐ Yes | | ■ Other. Specify Bank Usa | | ny Account Capital One | |
| | | | | | | |
| Part 3: | List Other | s to Be Notified About a Deb | t That You Already Listed | | | |
| is tryir have n notifie | ng to collect from more than one or ded for any debts | om you for a debt you owe to so creditor for any of the debts that s in Parts 1 or 2, do not fill out or | . • | in Parts 1 ditional c | or 2, then list the collection agenc reditors here. If you do not have ad | y here. Similarly, if you |
| | nd Address ontract Call | | On which entry in Part 1 or Part 2 did yo Line 4.1 of (<i>Check one</i>): | | • | |
| | x 3000 | ers inc | | | Creditors with Priority Unsecured Cla | |
| | sta, GA 3090 | 03 | | ■ Part 2: | Creditors with Nonpriority Unsecured | Claims |
| | | L | ast 4 digits of account number | | | |
| | nd Address stems, Inc | | On which entry in Part 1 or Part 2 did your in the state of the state | | original creditor? Creditors with Priority Unsecured Cla | · |
| - | ghway 96 E | | | | Creditors with Priority Unsecured Cia | |
| | ıĬ, MN 55127 | 7 | | ■ Part 2: | Creditors with Nonpriority Unsecured | Claims |
| | | <u> </u> | ast 4 digits of account number | | | |
| | nd Address | | On which entry in Part 1 or Part 2 did yo | | • | |
| | nd Funding Northside Di | | | | Creditors with Priority Unsecured Cla | |
| Suite 3 | | | | Part 2: | Creditors with Nonpriority Unsecured | Claims |
| | iego, CA 92 | 108 | | | | |
| | | l | ast 4 digits of account number | | | |
| Part 4: | Add the A | mounts for Each Type of Un | secured Claim | | | |
| | the amounts of f unsecured cla | | ns. This information is for statistical | reporting | purposes only. 28 U.S.C. §159. Ad | d the amounts for each |
| | | | | | Total Claim | |
| | 6a. | Domestic support obligations | | 6a. | \$ 0.00 | |
| | Total aims | | | | | |
| from Pa | | Taxes and certain other debts | you owe the government | 6b. | \$ 0.00 | |
| | 6c. | · · · · · · · · · · · · · · · · · · · | njury while you were intoxicated | 6c. | \$ 0.00 | _ |
| | 6d. | Other. Add all other priority unse | ecured claims. Write that amount here. | 6d. | \$ | <u>-</u> |
| | 6e. | Total Priority. Add lines 6a thro | ugh 6d. | 6e. | \$ 0.00 | |
| | | | | | | |
| | 6f. | Student loans | | 6f. | Total Claim \$ 0.00 | |
| | Γotal | | | | - 0.00 | _ |
| cla from Pa | aims art 2 6g. | Obligations arising out of a se | paration agreement or divorce that | | | |
| 5 1 | | you did not report as priority of | | 6g. | \$ 0.00 | _ |
| | 6h | Lionte to noncion or profit cha | ring plane and other cimilar dabte | 6h | (r. A AA | |

Official Form 106 E/F

6i.

Other. Add all other nonpriority unsecured claims. Write that amount

6i.

1,980.00

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Debtor 1 Betty G Hood-Escalante

Total Nonpriority. Add lines 6f through 6i.

1,980.00

| | | 20041116 | 11 | |
|---|-----------------|-------------------|-------------|-----------------------|
| Fill in this infor | | | | |
| Debtor 1 | Betty G Hood-Es | calante | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Waypoint
2760 Aurora Ave
Ste 100
Naperville, IL 60540

State what the contract or lease is for
One year lease

| | | Docume | nt Page 25 o | f 51 | |
|--------------------------------|--|--|------------------------|---|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Betty G Hood-Es | calante | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | | |
| | | | | | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case num | ber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | l Form 106H | | | | |
| | | lobtoro | | | 4044 |
| Sched | lule H: Your Cod | eptors | | | 12/15 |
| ill it out, a our name | nd number the entries in the and case number (if known you have any codebtors? (If | e boxes on the left. Attach). Answer every question. | the Additional Page to | o this page. On the top of a | ed, copy the Additional Page, any Additional Pages, write |
| = | | | | | |
| ■ No | | | | | |
| ☐ Yes | 5 | | | | |
| | hin the last 8 years, have you a, California, Idaho, Louisiana | | | | tes and territories include |
| | Go to line 3. | | | | |
| ⊔ Yes | s. Did your spouse, former spo | use, or legal equivalent live | with you at the time? | | |
| in line Form | 2 again as a codebtor only | if that person is a guarant | or or cosigner. Make s | sure you have listed the cr | h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The credito Check all schedules that | r to whom you owe the debt at apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| - | Number Street | | | _ | |

State

City

ZIP Code

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| Fill | in this information to identify y | Wir case. | | | | | | |
|----------------------------|--|--|---|-------------------------|----------------|---|--|---------------------------|
| | | Hood-Escalante | | | | | | |
| | btor 2 | | | | _ | | | |
| Uni | ited States Bankruptcy Court f | or the: NORTHERN DISTRI | CT OF ILLINOIS | | _ | | | |
| (If kı | se number nown) | | - | | | | d filing ent showing postp as of the following | • |
| | fficial Form 106l | | | | | MM / DD/ Y | YYY | |
| Be a sup spo atta | plying correct information. I buse. If you are separated an | s possible. If two married peo If you are married and not fili Id your spouse is not filing w form. On the top of any addit | ng jointly, and your ith you, do not incl | spouse is ude inform | living ation a | with you, incluation incluation with your spo | ude information use. If more spa | about your ace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-filing sp | oouse |
| | If you have more than one jo | ob, | ☐ Employed | | | ■ Emplo | | |
| | attach a separate page with information about additional | | ■ Not employed | | ☐ Not employed | | | |
| | employers. | Occupation | Unemployed | | | Fire Co | mmunications | Operator |
| | Include part-time, seasonal, self-employed work. | or Employer's name | - | | | Chicago | Fire Departn | nent |
| | Occupation may include stu or homemaker, if it applies. | dent Employer's address | | | | | Madison St o, IL 60607 | |
| | | How long employed t | here? | | | 2 | 8 years | |
| Pa | rt 2: Give Details Abou | ıt Monthly Income | | | | | | |
| | imate monthly income as of use unless you are separated. | the date you file this form. f | you have nothing to | report for a | ny line | , write \$0 in the | space. Include y | our non-filing |
| | ou or your non-filing spouse ha e space, attach a separate sh | ave more than one employer, coet to this form. | ombine the information | on for all er | nploye | rs for that perso | n on the lines be | low. If you need |
| | | | | | Fo | or Debtor 1 | For Debtor 2 non-filing spo | |
| 2. | | , salary, and commissions (bothly, calculate what the month | | 2. | \$ | 8,471.67 | \$ | 0.00 |
| 3. | Estimate and list monthly | overtime pay. | | 3. | +\$ | 2,492.62 | +\$ | 0.00 |

Calculate gross Income. Add line 2 + line 3.

\$ 10,964.29

0.00

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| Debt | or 1 | Betty G Hood-Escalante | _ | Case | number (if known) | | | |
|------|--|--|--------|--------|-------------------|---------|----------------------------|----------|
| | | | | | | | | |
| | | | | For | Debtor 1 | | ebtor 2 or iling spouse | |
| | Copy | y line 4 here | 4. | \$ | 10,964.29 | \$ | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 2,536.21 | \$ | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$_ | 730.21 | \$ | 0.00 | • |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 65.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 176.58 | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 325.37 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | 5g. | \$_ | 191.88 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: Charity | _ 5h.+ | - \$_ | 8.67 | + \$ | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 4,033.92 | \$ | 0.00 | |
| 7. | Calc | rulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 6,930.37 | \$ | 0.00 | = |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.00 | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$_ | 0.00 | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$_ | 0.00 | \$ | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | - \$ | 0.00 | + \$ | 0.00 | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | 0.00 | |
| 10. | | rulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 6,930.37 + \$_ | | 0.00 = \$ | 6,930.37 |
| 11. | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | 12. \$ | 6,930.37 |
| | | | | | | | | y income |
| 13. | Do y ■ | ou expect an increase or decrease within the year after you file this form No. | ? | | | | | |
| | | Yes. Explain: Debtor used to receive a pension, however, she | no lor | naer r | eceives the pe | ension. | <u> </u> | |

Official Form 106I Schedule I: Your Income page 2

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| Fill | in this information to identify your case: | | | | |
|-----------|--|---|-----------------------------|---|--|
| Deb | otor 1 Betty G Hood-Escalante | | Checl | k if this is: | |
| 1 | otor 2 ouse, if filing) | | | An amended filing A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| Unit | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN | OIS | 1 | MM / DD / YYYY | |
| | se number | | | , 22 , | |
| | nown) | | | | |
| | fficial Form 106J | | | | 4044 |
| Be | chedule J: Your Expenses as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this ember (if known). Answer every question. | | | | |
| Par 1. | t 1: Describe Your Household Is this a joint case? | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses | for Separate Househ | old of Debte | or 2. | |
| 2. | Do you have dependents? ☐ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 1 | | Dependent's age | Does dependent live with you? |
| | Do not state the dependents names. | Nephew | | 4 | □ No ■ Yes |
| | | Niece | | 4 | □ No ■ Yes |
| | | Granddaughter | | <u>17</u> | □ No ■ Yes □ No |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes | | | | ☐ Yes |
| Est | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date. | ou are using this for elemental Schedule | rm as a sup J, check the | oplement in a Cha e box at the top o | pter 13 case to report f the form and fill in the |
| the | lude expenses paid for with non-cash government assistance in value of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 106I.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | | 2,116.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues | | 4c. \$ 4d. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| Debte | Dr 1 Betty G Hood-Escalante | Case num | ber (if known) | |
|-------|---|------------------|--------------------|-------------------------|
| 6. | Utilities: | | | |
| - | 6a. Electricity, heat, natural gas | 6a. | \$ | 493.00 |
| | 6b. Water, sewer, garbage collection | 6b. | | 60.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | | 255.00 |
| | 6d. Other. Specify: | 6d. | | 0.00 |
| | Food and housekeeping supplies | — 7 . | · | 950.00 |
| | Childcare and children's education costs | 8. | \$ | 310.00 |
| | Clothing, laundry, and dry cleaning | 9. | | 160.00 |
| | Personal care products and services | 10. | | 165.00 |
| | Medical and dental expenses | 11. | | 295.00 |
| | Transportation. Include gas, maintenance, bus or train fare. | 11. | Ψ | 293.00 |
| | Do not include car payments. | 12. | \$ | 485.00 |
| | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| | Charitable contributions and religious donations | 14. | \$ | 8.00 |
| | Insurance. | | <u> </u> | 0.00 |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 0.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | · | 218.00 |
| | 15d. Other insurance. Specify: | 15d. | | 0.00 |
| | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | <u> </u> | 0.00 |
| | Specify: | 16. | \$ | 0.00 |
| | Installment or lease payments: | | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. Other. Specify: Husband's Chapter 13 Payment 16-14610 | 17c. | \$ | 765.00 |
| | 17d. Other. Specify: | 17d. | \$ | 0.00 |
| | Your payments of alimony, maintenance, and support that you did not report as | | | |
| | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| 9. | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | 19. | | |
| | Other real property expenses not included in lines 4 or 5 of this form or on Scheo | | | |
| | 20a. Mortgages on other property | 20a. | | 0.00 |
| | 20b. Real estate taxes | 20b. | · | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| 1. | Other: Specify: | 21. | +\$ | 0.00 |
| 2 | Coloulate value monthly evenence | | | |
| | Calculate your monthly expenses | | • | 6 000 00 |
| | 22a. Add lines 4 through 21. | | \$ | 6,280.00 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 6,280.00 |
| 3. | Calculate your monthly net income. | | | |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 6,930.37 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b. | | 6,280.00 |
| | 200. Sop, your monuny expenses nom mic 220 above. | 200. | Ψ | 0,200.00 |
| | 23c. Subtract your monthly expenses from your monthly income. | | | |
| | The result is your <i>monthly net income</i> . | 23c. | \$ | 650.37 |
| | • | | | |
| | Do you expect an increase or decrease in your expenses within the year after you | | | |
| | For example, do you expect to finish paying for your car loan within the year or do you expect your | mortgage | payment to increas | e or decrease because o |
| | modification to the terms of your mortgage? | | | |
| | ■ No. | | | |
| | □ Yes Explain here: | | | |

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| Fill in this | s information to identify your | case: | | | |
|--------------------|---|---------------------------|-----------------------------|--|-----------------------|
| Debtor 1 | Betty G Hood-Es | calante | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case num | nber | | | | |
| (if known) | | | | - | eck if this is an |
| | | | | am | ended filing |
| | | | | | |
| | | | | | |
| <u>Official</u> | Form 106Dec | | | | |
| Decla | aration About a | an Individual | Debtor's Sc | hedules | 12/15 |
| | | | | | |
| f two marr | ried people are filing togethe | r, both are equally respo | nsible for supplying corre | ect information. | |
| | | | | | _ |
| | | | | Making a false statement, concean fines up to \$250,000, or imprisor | |
| | ooth. 18 U.S.C. §§ 152, 1341, 1 | | rupicy case can result in | i filles up to \$250,000, or imprisor | intent for up to 20 |
| , , | , , | | | | |
| | | | | | |
| | Sign Below | | | | |
| Did v | you pay or agree to pay some | one who is NOT an attor | nev to help you fill out ba | ankruptcy forms? | |
| Dia y | you pay or agree to pay some | | ney to neip you im out be | and uptoy forms. | |
| = 1 | No | | | | |
| | Yes. Name of person | | | Attach Bankruptcy Petition | |
| | | | | Declaration, and Signature | ∍ (Official Form 119) |
| | | | | | |
| Under | r penalty of perjury, I declare | that I have read the sum | mary and schedules filed | with this declaration and | |
| | hey are true and correct. | | , | | |
| v . | /B # 6!! ! ! ! ! ! ! | | v | | |
| | s/ Betty G Hood-Escalante | | X Signature of D | Dobtor 2 | |
| | Betty G Hood-Escalante Signature of Debtor 1 | | Signature of L | Jeniui Z | |
| 0 | riginatare of Debtor 1 | | | | |
| D | Date December 1, 2016 | | Date | | |
| | * | | | | |

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| Fill | in this infor | mation to identify you | ır case: | | | | |
|-------------|---|----------------------------------|---|--|--|---|--|
| Del | otor 1 | Betty G Hood-E | scalante | | | | |
| | | First Name | Middle Name | Last Name | | | |
| | otor 2 | First Name | Middle Name | Last Name | | | |
| | ouse if, filing) | | | Last Name | | | |
| Uni | ted States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| 1 | se number nown) | | | | | Check if this is an amended filing | |
| Sta Be a | atemen | and accurate as poss | ible. If two married people | duals Filing for E | e equally responsible for s | | |
| | | vn). Answer every que | estion. arital Status and Where Yo | u Lived Before | | | |
| 1. | | ur current marital stat | | | | | |
| | _ | | | | | | |
| | ■ Marrie □ Not ma | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | |
| | ■ No □ Yes. L | ist all of the places you | lived in the last 3 years. Do r | not include where you live no | w. | | |
| | Debtor 1 F | Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there | |
| 3. state | | | | egal equivalent in a commu evada, New Mexico, Puerto R | | | |
| | ■ No □ Yes. M | lake sure you fill out <i>Sc</i> | hedule H: Your Codebtors (C | Official Form 106H). | | | |
| Par | t 2 Expla | ain the Sources of You | ur Income | | | | |
| 4. | Fill in the to | tal amount of income yo | ou received from all jobs and I have income that you recei | ng a business during this y all businesses, including par ve together, list it only once u | t-time activities. nder Debtor 1. | ilendar years? | |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | |
| | | | | | | | |

Case 16-37996 Doc 1 Filed 12/01/16 Entered 12/01/16 11:20:43 Desc Main Page 32 of 51 Document Case number (if known) Debtor 1 **Betty G Hood-Escalante** Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income from** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Debtor's Husband's** \$23,865.00 the date you filed for bankruptcy: Income **Pension Income** \$3,923.92 For last calendar year: Debtor's Husband's \$122,276.00 (January 1 to December 31, 2015) Income For the calendar year before that: **Debtor's Husband's** \$112,128.00 (January 1 to December 31, 2014) Income Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount
paid

Amount you
still owe

Was this payment for ...

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ Yes. List all payments to an insider.

| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|--|----------------------------|------------------|-------------------|----------------------|-------------------------|
|--|----------------------------|------------------|-------------------|----------------------|-------------------------|

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| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No | | ments or transfer a | any property on a | ccount of a de | ebt that benefited an | |
|-----|---|-----------------------------|----------------------|----------------------|-------------------------|--------------------------|--|
| | ☐ Yes. List all payments to an insider | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name | |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | |
| 9. | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case | |
| 10. | Within 1 year before you filed for bankrupte Check all that apply and fill in the details below | | rty repossessed, f | oreclosed, garnis | hed, attached | I, seized, or levied? | |
| | No. Go to line 11. Yes. Fill in the information below. | | | | | | |
| | Creditor Name and Address | Describe the Property | | | Date Value of th | | |
| | Explain what happened | | | | | property | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date | action was | Amount | |
| | Creditor Name and Address | Describe the action the | creditor took | taken | | Amount | |
| 12. | Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a No Yes | | rty in the possessi | ion of an assigne | e for the bene | efit of creditors, a | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | tcy, did you give any gifts | s with a total value | of more than \$60 | 0 per personí | ? | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the gi | you gave | Value | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No | | | | | | |
| | Yes. Fill in the details for each gift or con | | | | | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | al Describe what you | contributed | Dates | s you ibuted | Value | |
| Par | t 6: List Certain Losses | | | | | | |

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Case number (if known) Debtor 1 **Betty G Hood-Escalante** or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 11/30/2016 Swanson & Desai, LLC **Attorney Fees** \$360.00 2314 W North Ave Unit C-1W Chicago, IL 60647 kswanson@swansondesai.com **Access Counseling** 11/30/2016 Credit Counseling \$14.95 633 W 5th Street Suite 26001 Los Angeles, CA 90071 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of transferred or transfer was Address payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Description and value of the property transferred

Yes. Fill in the details.

Name of trust

Date Transfer was

made

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Debtor 1 **Betty G Hood-Escalante**

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | |
|-----|---|---|---|-------------------|----------------|--|---|--|
| | Name o | f Financial Institution and S (Number, Street, City, State and ZIP | Last 4 digits of account number | Type of accou | nt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| 21. | • | now have, or did you have within 1 other valuables? | year before you filed for | r bankruptcy, an | y safe de | posit box or other depos | itory for securities, | |
| | ■ No | s. Fill in the details. | | | | | | |
| | | f Financial Institution S (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | |
| 22. | Have yo | u stored property in a storage unit | or place other than you | r home within 1 | year befo | re you filed for bankrupt | cy? | |
| | ■ No □ Yes | . Fill in the details. | | | | | | |
| | | f Storage Facility S (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? | |
| Par | t 9: | entify Property You Hold or Control | I for Someone Else | | | | | |
| 23. | Do you for some | nold or control any property that sc eone. | omeone else owns? Incl | ude any propert | y you bor | rowed from, are storing | for, or hold in trust | |
| | ■ No | s. Fill in the details. | | | | | | |
| | Owner' Addres | s Name S (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value | |
| Par | t 10: Gi | ve Details About Environmental Inf | formation | | | | | |
| For | the purp | ose of Part 10, the following definiti | ions apply: | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | | |
| | | <i>us material</i> means anything an env us material, pollutant, contaminant | | as a hazardous | waste, ha | zardous substance, toxi | c substance, | |
| Rep | ort all no | tices, releases, and proceedings th | at you know about, rega | ardless of when | they occi | urred. | | |
| 24. | Has any | governmental unit notified you tha | t you may be liable or p | otentially liable | under or i | n violation of an environ | mental law? | |
| | ■ No □ Yes | . Fill in the details. | | | | | | |
| | Name of Address | f site S (Number, Street, City, State and ZIP Code) | Governmental un Address (Number, S ZIP Code) | | Enviro know | onmental law, if you it | Date of notice | |

Case 16-37996 Doc 1 Filed 12/01/16 Entered 12/01/16 11:20:43 Document Page 36 of 51 Debtor 1 **Betty G Hood-Escalante** Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Environmental law, if you Name of site Governmental unit Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Betty G Hood-Escalante Signature of Debtor 2 **Betty G Hood-Escalante** Signature of Debtor 1

Date December 1, 2016 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Debtor 1 Betty G Hood-Escalante

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| С | hapter 7: | Liquidation |
|---|-----------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Services provided by Debtor's counsel in preparation of the petition and costs associated with the filing of the case make it more efficient for Debtor and the Attorney to enter into and advanced payment retainer. Debtor's counsel reserves the right to refuse to enter into a security retainer due to the up-front costs associated with filing a Chapter 13 Bankruptcy. If any portion of the retainer is not considered earned or required for expenses it will be refunded to the client.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$360.00 toward the flat fee, leaving a balance due of \$3,640.00; and \$50.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <u>December 1, 2016</u> | |
|---------------------------------------|----------------------------|
| Signed: | |
| /s/ Betty G Hood-Escalante | /s/ Mehul D. Desai |
| Betty G Hood-Escalante | Mehul D. Desai |
| | Attorney for the Debtor(s) |
| | |
| Debtor(s) | |
| Do not sign this agreement if the amo | unts are blank. |

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | e Betty G Hood | d-Escalante | | Case No. | | |
|-------|---|--|---|----------------------|------------------------------|----------|
| | | | Debtor(s) | Chapter | 13 | |
| | | | ENSATION OF ATTOR | | , , | |
| 1. | compensation paid t | to me within one year before the f | 116(b), I certify that I am the attorned iling of the petition in bankruptcy, on of or in connection with the bank | or agreed to be paid | to me, for services rendered | d or to |
| | _ | | | | 4,000.00 | |
| | Prior to the fili | ng of this statement I have receive | ed | \$ | 360.00 | |
| | Balance Due | | | \$ | 3,640.00 | |
| 2. | The source of the co | ompensation paid to me was: | | | | |
| | Debtor | \square Other (specify): | | | | |
| 3. | The source of comp | pensation to be paid to me is: | | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 4. | ■ I have not agree | ed to share the above-disclosed co | mpensation with any other person t | inless they are memb | pers and associates of my la | ıw firm. |
| | | | ensation with a person or persons w names of the people sharing in the | | | m. A |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | |
| | b. Preparation and | filing of any petition, schedules, so of the debtor at the meeting of cred | ndering advice to the debtor in dete statement of affairs and plan which ditors and confirmation hearing, and | may be required; | | ·; |
| 6. | By agreement with | the debtor(s), the above-disclosed | fee does not include the following | service: | | |
| | | | CERTIFICATION | | | |
| | I certify that the forebankruptcy proceeding | | any agreement or arrangement for | payment to me for re | epresentation of the debtor(| s) in |
| | December 1, 2016 | 6 | /s/ Mehul D. Desai | | | |
| Date | | Mehul D. Desai | | | | |
| | | | Signature of Attorney Swanson & Desai | | | |
| | | | 2314 W North Ave | Unit C-1W | | |
| | | | Chicago, IL 60647 312-666-7882 Fax | | | |
| | | | kswanson@swan | | | |
| | | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Betty G Hood-Escalante | | Case No. | | |
|-------|---|---|------------|--|--|
| | | Debtor(s) | Chapter 13 | | |
| | VEI | RIFICATION OF CREDITOR M | ATRIX | | |
| | | Number of Creditors:13 | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | December 1, 2016 | /s/ Betty G Hood-Escalante Betty G Hood-Escalante Signature of Debtor | | | |

CCI/Contract Callers Inc Contract Callers Inc. Cci Augusta, GA 30901

CCI/Contract Callers Inc Po Box 3000 Augusta, GA 30903

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

First Investors Financial Services 5757 Woodway Dr Ste 400 Houston, TX 77057

First Investors Financial Services Attn: Bankruptcy 380 Interstate N Pwy Ste 300 Atlanya, GA 30339

Franciscan ExpressCare 211 Dixie Hwy Chicago Heights, IL 60411

IC Systems, Inc Po Box 64378 Saint Paul, MN 55164

IC Systems, Inc 444 Highway 96 East St Paul, MN 55127

Ingalls Memorial Hospital One Ingalls Drive Harvey, IL 60426

Michele Halliburton 17225 Oakwood Ct Country Club Hills, IL 60478

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

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Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

Signature Smiles Dental Care 1128 Lake St. Suite 1 Oak Park, IL 60301-1058